Directions: Use this form to submit changes for a 4-H VMO/unit’s contact name or address. Submit the form to the State 4-H Office. The letter sent to IRS should also be completed and a copy attached to this form.

|  |  |
| --- | --- |
| Name of 4-H VMO/Unit: |  |
| County: |  |
| 4-H Unit Volunteer or Other Person in charge of VMO/Unit: |  |
| EIN #: |  |

Name of 4-H VMO/Unit

From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4-H YDP Staff Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(print name) (signature)

**State 4-H Office Use Only**

Received copy of letter sent to IRS: Date: \_\_\_\_\_ Staff Initials: \_\_\_\_\_

Updates made to 4-H VMO/Unit EIN database: Date: \_\_\_\_\_\_\_ Staff Initials: \_\_\_\_\_

Updates made to 4hOnline Enrollment System. Date: \_\_\_\_\_\_ Staff Initials: \_\_\_\_\_

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